

THE PAVILION (Champaign), HARTGROVE HOSPITAL (Chicago), LINCOLN PRAIRIE BEHAVIORAL HEALTH (Springfield), RIVEREDGE HOSPITAL (Forest Park), STREAMWOOD HOSPITAL (Streamwood) and GARFIELD PARK (Chicago).

**Comments regarding**

**Concept Paper for an 1115 Waiver for Illinois Medicaid**

November 25, 2013

The Pavilion (Champaign), Hartgrove Hospital (Chicago), Lincoln Prairie Behavioral Health (Springfield), Riveredge Hospital (Forest Park), and Streamwood Hospital (Streamwood) submits the following comments to The Path to Transformation: Concept Paper for an 1115 Waiver for Illinois Medicaid (the “Concept Paper”).

As background, our hospitals are respected healthcare providers committed to making important investments in clinical service lines. We have developed specialized child and adolescent care for Autism, Neuropsychiatry, Substance Abuse, and Dialectical Behavioral Therapy. In addition several of our hospitals were recognized last year by the Joint Commission for excelling in Key Quality Indicators. Our hospitals have treated patients from all 102 counties in Illinois.

Combined our facilities operate almost 800 Inpatient Beds across the State and are a large provider of Illinois Medicaid recipients with most of these hospitals having utilizations greater than 50%.

Our Concerns about the four pathways:

1. Under HCBSW infrastructure, choice and coordination—How will access be expanded for its home and community based infrastructure for those with complex behavioral health needs?
2. Delivery system transformation—Who will be in charge of managing behavioral health in the Integrated Delivery Systems?
3. Population Health—What added resources will be available to focus on prevention and wellness?
4. Workforce—How will this workforce be increased and trained specifically to behavioral health?

As the State moves towards developing alternate models of care, i.e., CCE’s and ACES

1. How will behavioral be managed in those organizations?
2. Will it be “carved out” to a third party?
3. Will ACE’s contract directly with hospitals on risk bred arrangements?
4. What funding will be available for more prevention and wellness programs?
5. How will the \$114 million in general funding revenue for mental services that was cut between 2009 and 2011 be restored? If it will not be restored, how can access be increased?

As the state reviews the services with the waiver the State needs to consider the following service of payment enhancements:

1. Expand services to include a PRTF program using Title IX funds to improve the continuum of care.
2. Enhance funding to ensure adequate access for outpatient therapy, medication management and other wraparound services that lead to a medical home
3. Streamline the ability to have hospitals open outpatient clinics affiliated off-site but within 35 mile radius

Section 1B discusses Behavioral Health Expansion and Integration. These initiatives are currently in place now but have varying degrees of success and multiple state agencies involved.

1. How will all these agencies roles change?

Section 1C discusses stable living through supportive housing.

1. Is there housing identified for this population throughout the State to manage this population successfully? We applaud efforts of increased employment opportunities and so the waiver must address training needs to make this happen.

One of the goals of this initiative is to achieve significant savings and reduce unnecessary costs. These savings need to be reallocated within the Medicaid system. Illinois healthcare providers have dealt with the rate reductions. Slow payment cycles and shortage of physicians and workers. These savings are needed to solve these issues and help providers care for the most vulnerable population which is the Medicaid Population.